STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

APR 29 2019

DEPARTMENT OF STATE

PLEASE PRINT

| I. Name of Lobbyist(s) | in (| Bin | | | ARTA | IENT (|
|------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------|-----------------|--------------------------------------------------|---------------------------------|--------|
| II. Name of lobbyist's partne | rship, firm | or corporation, if | fany: | | | |
| Name of parts 72 3.1. S Business Address: (Street) | nership, firm | or comporation) (Town/City) | 4 | NH (State) | (/3×1) | |
| (LG) SQ-53 77 (Telephone) | (|) | ax) | e-mailim | Oborecticas | |
| III. This statement covers: (C reportable expense transaction | | | | | ay file a separate repor | t for |
| ☐ All reportable transactions | occurring in | the months prior | to the reportin | g date relative to the | ne following client: | - |
| (Full Na | ame of Client | t as it appears on the | Lobbyist Regis | tration Form) | | |
| OR All reportable transactions to unrelated to any particular clienters. | | rist (including the l | obbyist's fam | ily), or the lobbyin | g firm listed below whicl | h are |
| • | 25, 2018 [|] ration to 3/31/18 | | ly 25, 2018 om 4/1/18 to 6/30/18 | : | |
| | er 31, 2018 com 7/1/18 to | | | nuary 30, 2019 (From 10/1/18 to 12/3) | | - |
| V. There have been no fees If this box is checked, complete Concord, NH 03301. | | | | | | |
| V1. Check if additional repor | ts are attac | :hed: | | | | |
| ☐ If you have received fees of | r made exp | enditures, you mus | st file Addend | um A– Fees and E | xpenses | |
| ☐ If you have paid an honora Expense Reimbursement | rium or rein | nbursed expenses, | you must file | Addendum B ≒ Re | port of Honorariums or | |
| If you, your firm, or your f | amily has n | nade political contr | ributions, you | must file Addende | ım C- Political Contribu | tions |
| Sworn Statement/Affirmation I have read RSA 15, RSA 15-E and complete to the best of my (Signature of lobbyist) | 3, RSA 14-0 | C and RSA 664 and | i hereby swear | or affirm that the $1/25/15$ (Da | foregoing information is - te) | true |
| Print Name of lobbyist) | <u>. </u> | | | , | | |

PLEASE PRINT

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

| | II. Name of lobbyist's partnership, firm or corporation, if any: | |
|---|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | (Name of partnership, firm or corporation) | ./ / |
| | III. Name of Client he Vature Conseigna | Date 1/30/15 |
| | IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses: | relations, or public relations services |
| | a) Total of all fees received in this reporting period | a) \$ |
| | b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year) | b) \$ ear) |
| | c) Total of all fees received to date (Add lines a and b) | c) \$ |
| | d) Indicate the amount of any such fees that are due, but have not yet been paid | d) \$ |
| | V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report responses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported. | client and if expenditures are made by may be filed for the lobbyist(s)/firm. aggregate total of all expenses paid agenses; (b) the aggregate total of all le: meals purchased during a business as than \$10 that is given to the person and with a value of \$25.00 or less); and outing period of greater than \$25.00 for the of greater than \$25, purchase of a ter than \$25, but not greater than \$50, expense reimbursement, or political |
| | a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. | a) s 2 645,50 b) s 30.38 c) s 2175 |
| | b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less. | b) \$ 30.38 |
| • | c) Total of all itemized expenditures reported in detail in section VI. | c)\$ & T) |

| d) Total expenses for this reporting period (Add lines a, b and c) | d) \$ 4,85088 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report) | e) \$ 20,097.40 |
| f) Total of all expenses year to date | ns <u>24,948,28</u> |
| VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged. | obbying fees during this reporting |
| Paid to: | Amount: |
| Lobode 11 Associates - 80 Gale Chandles RI Landoff N. # 03501 | s 2 1 75 - |
| | \$ |
| • | \$ |
| | \$ |
| | \$ |
| | <u> </u> |
| · | |
| | |
| | |
| Sworn Statement/Affirmation by Lobbyist | |
| · | Albat Alba Farranina in Farmatian |
| I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief. | n that the foregoing information |
| | |
| (Signature of Jobbyist) | 4/24/19 |
| (Signature of aduly ist) | - (LAGIC) \ |
| (Print Name of lobbyist) | • • |
| (| , . |

•

· --,=

.